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## California Medicine



## EDITORIAL

### The Health Manpower Council

WITH THE FORMATION of the California Health Manpower Council, a sound beginning appears to have been made toward finding ways to meet increasing demands for health care services.

The new organization has been set up as a voluntary agency supported by all disciplines in the health care field to coordinate efforts in recruitment and training of personnel and the utilization of personnel and facilities involved in medical care. It grew from an idea put forward by the California Hospital Association, which also supplied the first impetus to get it under way. It is self-financing, the \$100,000 estimated needed for the first year's expenses having been subscribed by members; and it will hire its own full-time executive secretary and whatever supporting staff is needed.

Formed following two general Health Manpower Conferences, the Council has a membership of 25 persons representing education, consumers, labor and government as well as the various suppliers of health services. Thirteen of the members of the Council are selected from nominations by all organizations interested in the health manpower problems. The remaining 12 are representatives of designated organizations, as follows: One each from the California State Departments of Public Health, of Education and of Employment; one each from the California Nurses Association and the California Nursing Home Association; one from the California Dental Association and the Southern California Dental Association; three from the California Hospital Association and three from the California Medical Association. Terms of office will be staggered.

From its make-up, the organization appears to be in a position to bring about an exchange of ideas and information. Each of the elements involved will have a place to make proposals of its

own and to hear, weigh and shape the proposals of others. The Council will provide a place where each can influence—and be influenced. One great service it can perform for all its constituents is to eliminate the waste motion that is inherent in separate planning by individual organizations. From the information that will come to it from its variety of members, the Council should be able to determine what is needed and how best to go about supplying the need.

The California Medical Association may congratulate itself on the foresight that has equipped it well to fill its three places on the Council with physicians who already are well versed in the subjects on which the Health Manpower Council's proceedings will turn. They are Dr. Harold Kay, Dr. Frank C. Melone and Dr. C. Gerald Scarborough, who are the chairmen of, respectively, the CMA Commission on Community Health Services, the Committee on Paramedical Personnel and the Committee on Other Professions. The Commission and the two Committees have a substantial background of studious concern with many of the matters that must be involved in any general consideration of how to overcome the shortage of health care manpower. Behind these physicians are CMA staff members who are abreast of developments in these fields.

It is probable that, as with almost any organization as new and as far-reaching as the Council, shortcomings and inequities will be encountered from time to time. But they can be dealt with as they appear. The important thing is that we do have in California an organization that holds promise of bringing many interdependent elements into concert to solve a complicated problem that none of them could begin to solve alone.

Less important, of course, but still a matter of provincial pride, is that we in California are apparently the first among the states to have under way a full scale engagement with the problems of health manpower shortage.